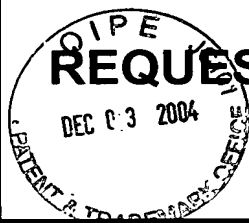


Re 2645

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE



REQUEST FOR CONTINUED EXAMINATION (RCE)

RECEIVED

TRANSMITTAL FORM (37 C.F.R. § 1.114)

DEC 07 2004

Technology Center 2600

DOCKET NO.
2345/39

APPLICATION SERIAL NO.
09/054,597

EXAMINER
Ovidio Escalante

ART UNIT
2645

APPLICANT(S):
Joachim POSEGGA

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

Date: Nov 30, 2004

Signature: Linda M. Shudy (deemise)
Linda M. Shudy (Reg. No. 47,084)

This is a **Request for Continued Examination** under 37 C.F.R. § 1.114 (RCE) of pending application Serial No. 09/054,597 (having an earlier RCE filing date of November 29, 2002 and a CPA filing date of November 8, 2001 of pending application Serial No. 09/054,597 having filing date April 3, 1998), entitled **METHOD AND APPARATUS FOR USING A SERVICE MADE AVAILABLE IN A TELECOMMUNICATIONS NETWORK**.

The following constitute(s) the submission **required** by 37 C.F.R. § 1.114(a) and is (are) attached:

 Information Disclosure Statement (as per 37 C.F.R. § 1.114(c)) (attached).

 X Other Submission: Amendment

1. The filing fee for this RCE and the required amendment/submission is calculated below. The fee below is calculated based on the status of the claims after the entry of the attached amendment/submission. The fee for any new additional claims is included with this RCE, the fee for previously entered additional claims having already been paid.

	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA*	RATE (\$) PER CLAIM	FEE (\$)
BASIC FEE						790.00
TOTAL CLAIMS	20	20	20	0	18.00	0.00
INDEPENDENT CLAIMS	3	3	3	0	88.00	0.00
MULTIPLE DEPENDENT CLAIM	--	--	--	-	300.00	--
				*Number extra must be zero or larger	TOTAL	790.00

12/06/2004 AWONDAF1 00000077 110600 09054597

01 FC:1801 790.00 DA
02 FC:1255 2080.00 DA

2. Please charge the required RCE and Submission filing fee of **\$790.00** to the deposit account number **11-0600** of **Kenyon & Kenyon**.
3. The Commissioner is authorized to charge the appropriate fee, which is believed to be **\$2080.00** (for the five-month extension) to Deposit Account No. **11-0600**. The Commissioner is also authorized, as necessary and/or appropriate, to charge payment of the fees (including any additional extension fees) required, associated with this communication or arising during the pendency of this application, and/or to credit any overpayment, to the deposit account number **11-0600** of **Kenyon & Kenyon**.
4. **Two duplicate copies** of this Transmittal Form are enclosed for the above purposes.

Respectfully submitted, *By: [Signature] (per [Signature])*
Reg. No. 47084

Dated: Nov. 30, 2004

By: [Signature]
Richard L. Mayer (Reg. No. 22,490)

KENYON & KENYON
One Broadway
New York, New York 10004
(212) 425-7200 (telephone)
(212) 425-5288 (facsimile)

CUSTOMER NO. 26646